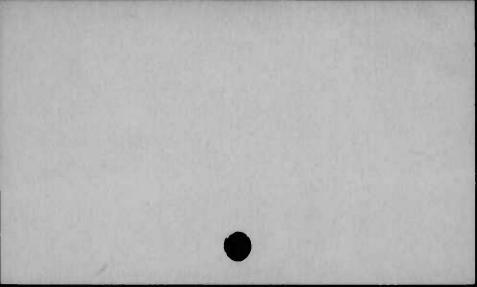
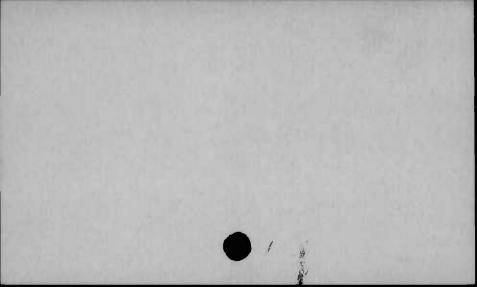
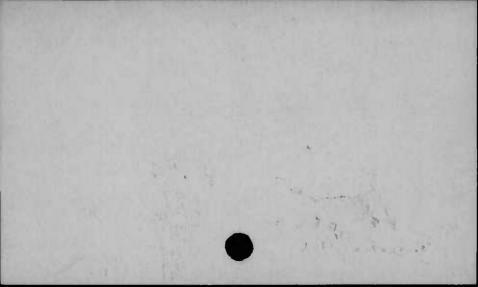
Name in Full Certificate of Death Native of Number of children living Single Wife Mother's Name Death Accident, Suicide, Homicide Address Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. tierary bureatt, mass



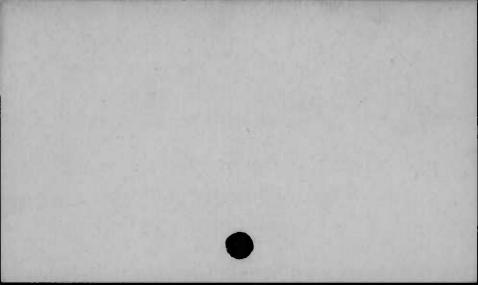
Namo in Full Certificate of Death Campbell Occupation Age Female Single Widower Number of children limber Wife S Per. A. F. Campbell Name Margaret Father's 1. Campbell Primary Melena (began 3rl day) How long sick 24 hours Immediate Exhaustion Death Accident Suicide Hamicide M. R. Careckoon Must be signed by physician, if any in ettendance, otherwise by coroner, undertaker or minister. TIRRARY RUBEAUT PERES



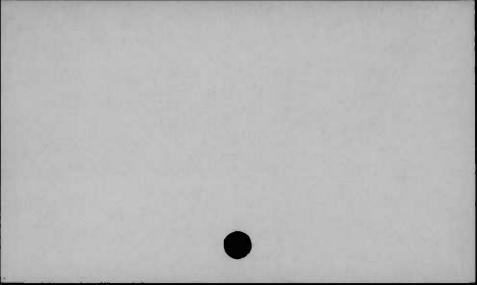
Name in Full Certificate of Death MARYLAND Native of Number of children living Husband Wife Father's Name How long sick Cause of Accident, Suicide, Homicide Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65966



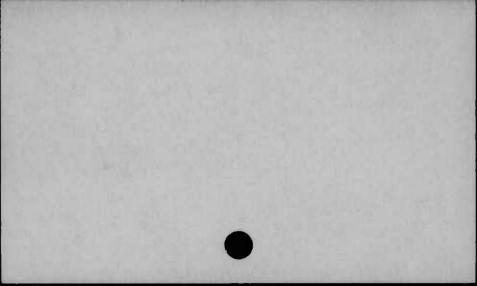
Name in Full Certificate of Death Native of - Number of children living Widower Huchand Mother's Name How long sick Cause of Immediate ---Accident, Suicide, Homicide Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65968



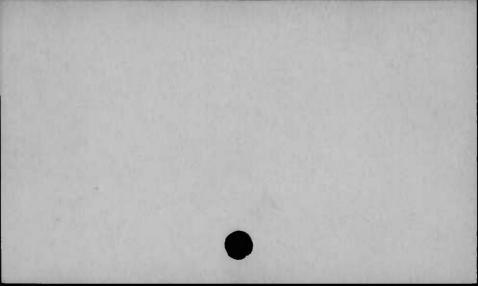
Name in Full Certificate of Death Died at Occupation Native of maryland Housember Date 189 Single Number of children living TUSDAMO tehanny Wife Father's Name Name How long sick Cause of Death Reported by Address Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, CEAGE



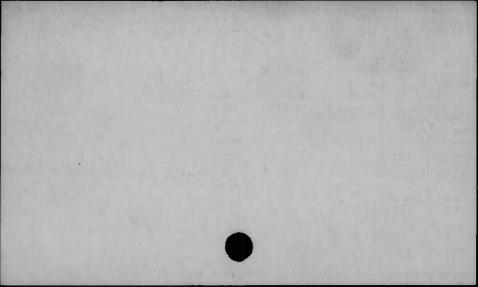
Name in Full Certificate of Death Edward Navis July 29 Stagle Widower Number of children living Five an Stocksdell hos. Davis Name Aun Davis (Comin) Primary Caucer of Bladder 10 mouths (?) Immediate Astherica 259 Reported by Jun B. Gambrill, M.D., Alberton, Howard Geo. U.S. Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65966



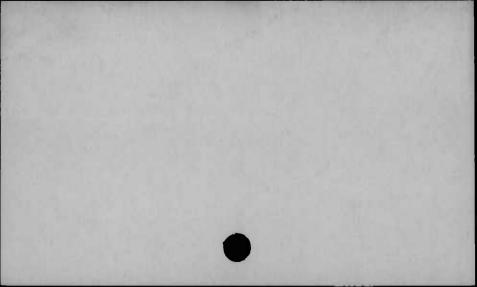
Name in Full Certificate of Death alrun J. Daris Died mai Ellicott Ciz Howard Native of Occupation July 31 Ball Count, machinists Age 74 5. > Date 1898 Married Widow -Female Golored Single Widower Number of children living 4 Husband Eliza ann Wesley Mother's Father's not known Name nal hour Name Primary Brights Disease, Hidneys 97 about 2 yes Death (Immediate Bulmonucy Congrestion Accident, Suicide, Homicide Reported by William & Hodges - MD. Address Ellicoll City Mc Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65988



Name in Full So Whin George Dickson Occupation Colored Widowar Number of children living Mother's Name Primary 6 ese bus Spinal minigiles nu hours Immediate Com Vulgions 3 Accident, Suicide, Homicide Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65968



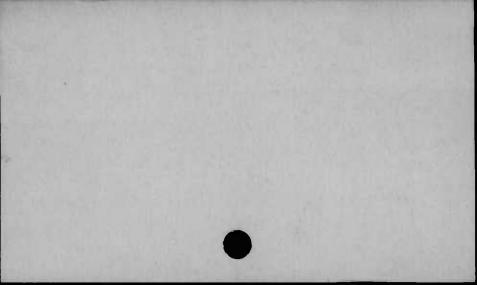
Name in Full Certificate of Death Addie Juser & arace Native of Occupation Date 189 8 marr Married Widow Female Single Withowar Number of children living Father's Edward Rusin Name Clumic How long sick Primary Pulmonary Consumbtion Immediate exhaustion - 22a Fortin unum M. O Davage Toward Co. Maryland Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. I TPRARY BUREAUT, SEDER



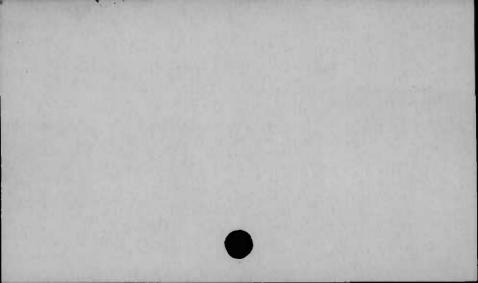
Name in Full Date !898 Male Number of children living WHEn Father's Name Cerebrat Nemorrhage (?) Immediate Inleuse heat ?! Accident Suiside Homicide Reported by Sauit J. Fort M. D. Elicoil-City Howard Co. Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 85988

"of my head" and fell over dead. Had complaned for a long period of panis in head had alheromatous arteries, and there was some puffues's about audles ofrecent you. also un intractable Exzema Thanks.

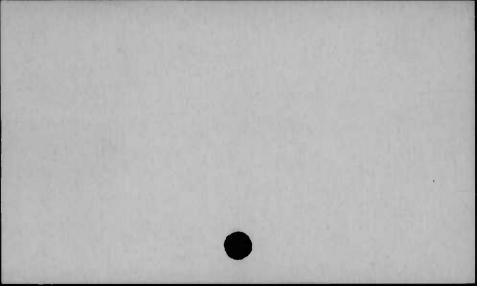
Name in Full Certificate of Death Annie Isabel Passano Died at Stchester Noward Y. M. D. N Native of Occupation Age 24-11 -4 Maryland Houseurf Married Widow Diverged. Female Golored Single Widower Number of children living Wife of Leonard Grant Passano Name George R. Clark Name E.R. Clark (Rasin) Cause of Primary Acute forlmonary tuberculosis about 7 mos. Death Immediate Tubercular meningities Assident Sciente Reported by MMP. Eareckson 220 Address ElkRidge, Md. Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. TIRRARY BUREAUT ARREST



Name in Full Certificate of Death Ethel Adalaide Peddicord Died at ElkRidge Horrard Date 189 & July White Married Widow Divorced Female Colored Single Widower Mumber of children lump Husband of Infant Father's Atephen E. Pedaicon Name Ella Peddicard Cause of Primary Entero Colitin 82 How long sick about 4 wks. Death (Immediate Aceste (pseudo) hydrocephalus Acoistant Emerita Homacide Reported by M.R. Careckson Address ElkRidge, Md Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, SEGOR



Name in Full Certificate of Death David Arthur Strole Died at Alberton Howard Native of Coupation will July 30 operative Widown Number of children Lying Single Name Frank P. Strole Name Hary E. Comer Cause of Primary Drowning 148 How long sick Accident, Sweets Home Reported by MinBlambrill, M.D., Address Alberton Howard Co., Md. Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65968



Certificate of Death Name in Full Eliza Williams. Died at Elecottili Howard Date 189 8 July 2-/ Age 30 Colored Single Widower Number of children living of alexander Welleams Mother's anna mason Pather's Mathew Coals Death Immediate In Testinal Hern or hazecident Swieder Hommeide How long sick Reported by 139, 13yrno mal Ellicost lieg Howard les med Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. LIBRARY BUREAU, 65968

